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POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>W</i>	<i>68719</i>	<i>9/28/00</i>
O.I.P.E. CLASSIFIER			<i>5/14-3-14</i>
FORMALITY REVIEW	<i>W</i>	<i>SL 861</i>	<i>10/30/00</i>
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 - ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

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Best Available Copy

If more than 150 claims or 10 actions  
 staple additional sheet here

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